

Welcome to the Profession

Grace Faith Chao, MD

Month 1

4:00 PM. Right on time.

I am walking down the street with my brother during his first visit with me since I began residency. I am 2 weeks in. I turn to him and say, “Wait a second.”

I place my hand on the cement wall next to us, and I start to heave.

“Um . . . are you OK?”

“Yeah. No worries. My body is just adjusting.”

I go on to describe how every day at 4:00 PM after a 24-hour shift, I have a dry heaving episode. So far no vomiting. So far.

My brother is absolutely horrified.

The second-year residents tell us how lucky we are as interns to be “allowed” to do 24-hour call. I do not understand—it seems like a punishment. My body becomes so confused about day and night that I am simultaneously exhausted and cannot sleep when I lay down because my mind is racing with the thoughts of the day. Did I remember to replete all my patients? Did I order the correct labs for tomorrow? Did I toss the extra lists and stickers into the HIPAA bins? And I remind myself that I still have to find time to read and practice surgical skills either on call or afterward in my “free time.” I have not had a pimple since age 13, yet now I feel a humongous one forming near the very tip of my nose.

Month 3

On the first day of residency, newly minted second-year residents invited the interns to a local restaurant for dinner. There were about 20 of us seated outside and another 30 patrons sitting inside. We were having a good time—laughing at getting-to-know-you types of questions; sharing about our families, significant others, friends we had left behind, pets we had or were planning to get; and enjoying the warm summer sunset. Then we noticed we had waited about 40 minutes, and our nachos had not yet arrived. We tried to get our server’s attention. When that failed, we tried to look around for another server we could ask for help. There was not one. She was the only server for the entire restaurant.

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It is now 3 months later, and as a trauma intern, I am sitting in the workroom thinking that I not only understand her pain, but I also feel it. Today, I have 38 patients. Today, all of my patients have extensive plans. Today, I am going to discharge 8 of them, all of whom suffered polytraumas and will have new medications and numerous follow-up appointments. Today, it is Saturday, and I am the only floor resident, rounding alone on 2 teams with the attending physician. And today the weather is good, so rounds has already been interrupted by 3 full traumas. Nurses are paging me that patients are angry. It has been 4 hours since the first patient was told she could go home, and her ride is here. Other patients are starting to wonder why they can’t leave the hospital yet. “Well, when can you get it done?” I plead with the nurses. “We’re still rounding.” I think they can hear the despair in my voice because their tone changes, and they say to “please call back when you are ready.”

Month 4

As interns, we experience days when we get to the hospital before the sun rises and don’t have anything to eat after 4:30 AM breakfast until sign-out is over at 6:30 PM. If you are lucky, you can catch a few minutes during the day to grab lifesaving crackers and peanut butter from the nutrition closet. Though, I am *really* lucky now because I am on a pediatric ward, so my diet has expanded to Goldfish and the occasional bag of Animal Crackers. Some days, I get home, and I have waited so long to eat that I am past the point of being hungry. We tell our patients the importance of eating well and being active, and here I am, not having stepped into a gym once all intern year, with my weight fluctuating somewhere within a 17-pound range.

Month 6

I remember my first medical school course: “Introduction to the Profession.” We read *The Spirit Catches You and You Fall Down*, we wrote letters to ourselves to open after 4 years of medical school, and we had small group discussions about what we thought it meant to be a physician. Mostly, we got to know our classmates and basked in the warmth of professors’ words about the noble profession we were

joining. Perhaps, if they had been honest about all the aspects of becoming a physician, we would have reconsidered.

I am not on 24-hour call, but I might as well be. I am caring for between 15 and 18 patients in the intensive care unit and step down unit. I have been getting to work at 5:30 AM after a 40-minute drive. It is now 9:00 PM, and the nurse tells me the family of my sickest patient wants to talk to someone from the team. I go over to say hello to my patient's daughters, and they greet me with smiles. One asks, "Doc, do you ever go home? I see you morning and night every day I have been here."

Month 11

Now we are nearing the end of intern year, and if there is anything I have learned, it is that intern year is universally hard. People warned me that it would be like nothing else I had ever done. And they were right.

I have never been so good at devising ways to cut down minutes between tasks in a day. I have never been so good at falling asleep right when I lay down and shut my eyes, so that I can take a 15-minute nap here and there on 24-hour call. I have never been so

good at cooking healthy meals and resisting the temptations of hospital ice cream and cookies.

Intern year is also universally great. When my senior resident comes to find me in the workroom to check on me after my patient passes away. When I successfully complete a case on my own in the operating room for the first time. When I do a physical examination on a baby, and he starts to giggle. When I realize that I am still able to create a safe, quiet space for patients to tell me how they are feeling no matter how busy I am. When I get a call from a nurse because my patient wants to give me a hug before she leaves. When a family waiting for their loved one to pass tells me how much they appreciate that I am there with them.

And I am no longer dry heaving at 4:00 PM postcall.



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